

AUTHORIZED UTILITY REPRESENTATIVE FORM FOR TELECOMMUNICATIONS CARRIERS

TYPE: ☒ IXC

☐ CLEC

☐ ILEC

☐ Wireless

2011-29-A

228183

CERTIFICATED COMPANY INFORMATION

Optic Internet Protocol, Inc.

Company Name

FEIN/SSN

N/A

866-925-1049

Db/a/fka

Telephone #

3050 Royal Blvd. South, Suite 165

Posted: led

Mailing Address

Alpharetta, GA 30022

Dept: SA/OPS

City, State, Zip Code

Date: 2/23/11

3050 Royal Blvd. South, Suite 165

Business Location

Time: 11:15

Alpharetta, GA 30022

Fulton

City, State, Zip Code

County

REGISTERED AGENT INFORMATION

Registered Agent: National Registered Agents, Inc.

Mailing Address: 2 Office Park Court

City, State, Zip Code: Columbia, SC 29223

Pursuant to the Commission's rules and regulations, print or type company contact for the following areas:

- A. Gregory Allpow
General Manager (Include address if different than above.)
 866-925-1049 / 866-532-9490 / oipregulatory@oip telecom.net
 Telephone Number Facsimile Number E-mail Address
- B. Same
Customer Relations /Complaints Representative (Include address if different than above.)
 Telephone Number Facsimile Number E-mail Address
- C1. Same
Customer Relations/Complaints Representative for Escalated Complaints (Include address if different than above.)
 Telephone Number Facsimile Number E-mail Address
- C2. Same
Customer Contact (Toll Free Number)
- D. Same
Engineering Operations (Include address if different than above.)
 Telephone Number Facsimile Number E-mail Address
- E. Same
Test and Repair (Include address if different than above.)
 Telephone Number Facsimile Number E-mail Address

FEB 23 2011
 PSC SC
 CLERK'S OFFICE

Telephone Number

Facsimile Number

E-mail Address

F.

Same

Emergencies (During non-office hours)

Telephone Number

Facsimile Number

E-mail Address

In addition, please provide the following company contact information to assist in proper routing of correspondence and invoices:

G.

Same

Regulatory Officer (Include address if different than above.)

Telephone Number

Facsimile Number

E-mail Address

H.

Same

Dual Party Mailings (Name)

Mailing Address

Telephone Number

Facsimile Number

E-mail Address

I.

Same

Interim LEC Fund Mailings (Name)

Mailing Address

Telephone Number

Facsimile Number

E-mail Address

J.

Same

Universal Service Fund Mailings (Name)

Mailing Address

Telephone Number

Facsimile Number

E-mail Address

K.

Same

Gross Receipts Mailings (Name)

Mailing Address

Telephone Number

Facsimile Number

E-mail Address

L.

Same

Lifeline Mailings (Name)

Mailing Address

Telephone Number

Facsimile Number

E-mail Address

Gregory Allpow

This form was completed by (print name)

President

Title

Signature

Date

RETURN COMPLETED FORM TO:

Public Service Commission of SC
Clerk's Office
Post Office Drawer 11649
Columbia, South Carolina 29211

Office of Regulatory Staff
Attn: Jeanne Gordon
1401 Main Street, Suite 900
Columbia, South Carolina 29201

(Rev. PSC 11/2010)